

EDITORIALS

A PROBLEM IN MEDICAL ECONOMICS

Modern business co-ordinates the facilities and resources necessary to produce a given result. This requires the harmonious blending and utilization of specialists in direct and collateral lines—organization. Similar policies prevail in some of the professions. It is not usual to see a successful attorney constituting a unit of service. Why? Simply because it is better business for the lawyer and better business for clients for several men, specialists in the various branches of the law, to associate themselves together. Progress along almost all lines, with improvement in service to the public and in net income to the workers, is the result of combinations of efforts into efficiency units of greater scope than may be found in one man.

To a large extent physicians are still trying to handle the great humanitarian service of the prevention and cure of disease on the basis of competition between individuals when, as a matter of fact, the discharge of our full duty requires a larger unit. No one man can be a competent unit for the discharge of all the duties of the physician. Not having the group organization of the business world and other professions, there is a strong tendency to act as brokers for the things we cannot do adequately.

The vices of *secret* fee-splitting, expensive institutions and many other familiar problems are perfectly natural outgrowths not of our faulty science, but of our faulty business methods. The one-man unit of service in medicine in this modern day sometimes means mediocre service to the patient, or brokerage connections that are expensive to the patient and time consuming for the physician. These basic facts explain to a large degree why our field of activity is being constantly narrowed, our work beyond individual effort made less effective, and the average income of physicians kept at a disgracefully low figure.

Governments and municipalities and non-medical voluntary societies have taken over most of the great field of preventive medicine; practically all large corporations have their own medical departments, run on business bases; insurance companies maintain medical departments and build and operate their own institutions; accidents and injuries are handled largely by the State, and so on through a long list, showing a constantly narrowing field for the individual independent medical man, while the big work of our profession in the prevention and cure of disease and the institutions necessary to our work are passing out from medical control to lay business management, and physicians are becoming more and more employes of the organizers of system or of politics.

It behooves the medical profession to give these matters more serious attention than they are now giving and to take the lead in solving what should be their own problems.

It is possible and desirable that competent physicians associate themselves together in groups in such a way that they can render better service, more economically, to sick people than they are now doing as individuals. This can be done and is being done by certain groups in such a way that there is no undue or unfair competition with the individual physician and in such a way as not to endanger the personal responsibilities and relations between the patient and any member of the group.

The first essential in any group formation is, that it have as executive a non-practicing member who has a practical economic training and at the same time has the true physician's ideals, altruism and love of service.

WILL "FOOD SPECIALISTS" SUPERSEDE PHYSICIANS

Before answering more definitely the inquiries that are being received from physicians over the State regarding nutrition and dietotherapy publicity, and in order that opinions of physicians may be available, the editor welcomes answers to the following questions:

Is nutrition and dietetics a medical or a non-medical subject?

Is dietetics, as it is being used in popular parlance, developing into another novel "system" of medicine? Why all the books and other publications by M. D.'s and other D.'s discussing the new (?) "science" of nutrition? Why the extensive independent organizations? Why the constantly expanding and extending courses by some schools? Why so much propaganda in so many private commercial, scientific, hospital, nursing and similar magazines? Why is it that most of these articles are thinly disguised criticisms of physicians and hospitals? Who is paying for the propaganda invading the movies, the fairies, the expenses of traveling lecturers and other circus food performers?

What is the meaning of the reports now coming into every medical center of the diabetics, chronic nephritics and other patients who are under the care of "food specialists" and food purveyors? Why do newspapers find it profitable to have "food specialists" pages? Why do department stores run dietetic departments? Why are so many mixtures of bran and chaff being advertised?

Is the public being prepared for the announcement of a new specialty of medicine to be conducted by non-medical persons? Has the time arrived when many persons are now being treated by these people without reference to a physician? Is it not about time that physicians gave this question some serious attention?

MINERAL WATERS

Among other classes of advertising, the California State Journal of Medicine carries the advertisements of a number of wholesome waters of one sort or another. Its columns are open to any ethical advertisement of an ethical product. The fact that an advertisement is carried in the Journal should be, and is, interpreted by every member of